

VIRGINIA STATE CORPORATION COMMISSION BUREAU OF INSURANCE

Title Settlement Agent/Agency Financial Responsibility Certification

As required by the provisions of the Virginia Consumer Real Estate Settlement Protection Act (Title 6.1, Chapter 1.3, Code of Virginia) and the Bureau's Regulations issued thereunder, I hereby certify that I have in full force and effect the following insurance and bond coverages, in conjunction with my registration as a title settlement agent:

1. An errors and omissions insurance policy providing limits of at least \$250,000 per occurrence or per claim and issued by an insurer authorized to do business in the Commonwealth of Virginia.

Check (2a or 2b)

- ☐ 2.a. A blanket fidelity bond or employee dishonesty insurance policy issued by a company authorized to write such bonds or insurance in Virginia providing limits of at least \$100,000 per occurrence or per claim.

or

- ☐ 2.b. I am hereby requesting or have previously been granted an exemption from this requirement because I have no employees other than myself or other licensed owner(s), partner(s), shareholder(s), or member(s).

I further certify that all such coverages will be maintained in full force and effect throughout the time I act as a title settlement agent. I understand that these requirements are subject to further verification by the Bureau at its discretion, and I agree to provide satisfactory evidence of such coverages upon request.

Typed or Printed Name of Settlement Agent/Agency

Date

Signature

License Number/Federal Tax ID

(Effective 5/30/02)